		PTO/SB/05 (08-03	Ź	
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UTILITY	Attorney Docket No.		95.	
PATENT APPLICATION	First Inventor	SLOBODAN DAVID DAVIDOVIC	497   U.S. F 10/690958	
TRANSMITTAL	Title	UTILITY CART LIFTING PLATFORM	49/ 10/6	
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.		<u>デ</u>	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO:	Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450		
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)  Applicant claims small entity status.  See 37 CFR 1.27.  3. Specification [Total Pages 34 ] (preferred arrangement set forth below)  - Descriptive title of the invention  - Cross Reference to Related Applications  - Statement Regarding Fed sponsored R & D  - Reference to sequence listing, a table, or a computer program listing appendix  - Background of the invention  - Brief Summary of the Invention  - Brief Description of the Drawings (if filed)  - Detailed Description  - Claim(s)  - Abstract of the Disclosure	8. Nucleotide and/or Ar (if applicable, all nect a. Computer b. Specificat i. CD- ii. Pape	mino Acid Sequence Submission essary) Readable Form (CRF) ion Sequence Listing on: ROM or CD-R (2 copies); or		
4. Drawing(s) (35 U.S.C. 113) [Total Sheets	10. 37 CFR 3.73(I (when there is English Trans 12. Information Di Statement (ID Preliminary Ar Return Receip (Should be sp. 15. Certified Copy (if foreign prio. Nonpublication	an assignee) Attorney lation Document (if applicable) isclosure S)/PTO-1449 Citations mendment of Postcard (MPEP 503) ecifically itemized) of Priority Document(s) rity is claimed) In Request under 35 U.S.C. 122 oplicant must attach form PTO/SB/35		
18. If a CONTINUING APPLICATION, check appropriate box, and sup specification following the title, or in an Application Data Sheet under 3	ply the requisite information 7 CFR 1.76:	n below and in the first sentence of the		
Continuation Divisional Continua	tion-in-part (CIP) of price	or application No.:		
Prior application information:  Examiner  For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the 5b, is considered a part of the disclosure of the accompanying continuation. The incorporation can only be relied upon when a portion has been inadver	or divisional application and tently omitted from the subm	h an oath or declaration is supplied under Box is hereby incorporated by reference.		
19. CORRESPON	DENCE ADDRESS		-	
Customer Number:	OR [	Correspondence address below		
Name SLOBODAN DAVID DAVIDOVIC				
Address 38 MASSEY DR.			-	
City CHARLOTTETOWN	State PE	Zip Code C1E 1R6	-	
	Telephone 902-368-1947 Fax			
Name (Print/Type)   SLOBODAN DAVID DAVIDOVIC	Registration No. (Attorney	y/Agent)	7	
Signature S 1		Date Apiapiaga	-	

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mall Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)

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FEE TRANSMITTAL		Complete if Known			
FEE IRANS	WILLIAL	Application Number			
Fifective 10/01/2003. Patent fees are subject to annual revision.  Applicant claims small entity status. See 37 CFR 1.27		Filing Date	10/20/2003		
		First Named Inventor	SLOBODAN DAVID DAVIDOVIC		
		Examiner Name			
Applicant daints small entity status. S	(\$) 385	Art Unit			
TOTAL AMOUNT OF PAYMENT		Attorney Docket No.			

METHOD OF PAYMENT (check all that apply)  FEE CALCULATION (continued)							
Check Credit card Money Order None	1	3. ADDITIONAL FEES Large Entity   Small Entity					
Deposit Account:	Fee	Fee		Fee			
Deposit	Code			(\$)	Fee Description	Fee Paid	
Account Number	1051	130	2051	65	Surcharge - late filing fee or oath		
Deposit Account Name	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet		
The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	<b></b>	
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	<b>  </b>	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	L	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
	1251	110	2251	55	Extension for reply within first month		
FEE CALCULATION	1252	420	2252	210	Extension for reply within second month		
1. BASIC FILING FEE Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month		
Fee Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month		
1004 770 2004 205 LNUb Sline Son	1255	2,010	2255	1,005	Extension for reply within fifth month		
1002 340 2002 170 Design filing fee 385	1401	330	2401	165	Notice of Appeal		
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	i	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 385	1452	110	2452	55	Petition to revive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	1,330	2453	665	Petition to revive - unintentional		
Fee from	1	1,330	2501	665	Utility issue fee (or reissue)		
Extra Claims below Fee Paid  Total Claims X = X	1502	480	2502	240	Design issue fee		
Independent 3** - V	1503	640	2503	320	Plant issue fee	<u> </u>	
Claims -3 -	1460	130	1460	130	Petitions to the Commissioner		
	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
Large Entity   Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt		
Code (\$) Code (\$)	8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
1202	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))		
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))		
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	Request for Continued Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application		
SUBTOTAL (2)	Other fee (specify)						
**or number previously paid, if greater, For Reissues, see above **or number previously paid, if greater, For Reissues, see above **or number previously paid, if greater, For Reissues, see above **or number previously paid, if greater, For Reissues, see above **or number previously paid, if greater, For Reissues, see above **or number previously paid, if greater, For Reissues, see above **or number previously paid, if greater, For Reissues, see above **or number previously paid, if greater, For Reissues, see above **or number previously paid, if greater, For Reissues, see above **or number previously paid, if greater, For Reissues, see above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, See above **or number previously paid, if greater, For Reissues, For Reis							
SUBMITTED BY (Complete (if applicable))							

Registration No. SLOBODAN DAVID DAVIDOVIC Name (Print/Type) Telephone 902-368-1947 (Attorney/Agent) 10/20/2003 Signature

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